Bringing Baby Home:

A Workshop for New and Expectant Parents

John M. Gottman, Ph.D., Alyson F. Shapiro, Ph.C.

Relationship Research Institute

Joni Parthemer, M.Ed.

Swedish Medical Center

Addresses: 4000 NE 41st St, Seattle, WA 98105; Alyson Shapiro, Project Coordinator, Bringing Baby Home, John Gottman, Ph. D., Executive Director Relationship Research Institute, and Emeritus Professor of Psychology, University of Washington. alysons@gottmanresearch.com; johng@gottmanreseearch.com; FAX 206-832-0301.

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Abstract

For as many as 67% of new parents, the transition to parenthood is accompanied by sharp declines in relationship quality, significant increases in relationship conflict, increased depression and psychopathology, and decreased quality of the parent-infant interaction. There has been no known psycho-educational intervention that has successfully taught couples the skills that they will need to preserve intimacy in their relationship, keep fathers involved with the baby, and help parents understand and appreciate infant development. This article reports on a research based and research tested two-day psycho-educational workshop designed to teach couples these skills while experiencing the transition to parenthood.
1957 LeMasters claimed that 83% of new parents went through moderate to severe crisis during the transition to parenthood. His claims were initially refuted and subsequently strongly debated by scholars. LeMasters’ claims were based entirely on the results of retrospective studies. Beginning in the 1980’s, however, prospective longitudinal studies began to appear and they primarily confirmed LeMasters’ claims (for reviews see Belsky & Pensky, 1988; Cowan & Cowan, 1988). After a series of 15 longitudinal studies, it is now accepted that the transition to parenthood is a stressful period for caregivers and because of decreased quality of parent-child interaction, a stressful period for the development of the baby (Cowan & Cowan, 2000). The issue at stake is momentous because of what might fail to develop in the baby. Research has shown that in the first three years of life fundamental neural processes are formed that include an infant’s ability to self soothe, to focus attention, and to establish trust in the fundamental love and nurturance of its parents and thus form attachments to them (National Research Council Institute of Medicine, 2000; Seigel, 1999). The neural part of these processes involves the myelination of the vagus nerve (the tenth cranial nerve) and the development of the frontal lobes that control not only how emotion is processed but also the executive functions of cognition (e.g. planning, organization, problem solving).

Through research at the Gottman laboratories in Seattle, Washington, we discovered that in face-to-face interactions with a baby, the two parenting behaviors that
have a negative impact on infants during family interactions are uncoordinated play between caregivers and over-stimulation of the baby (Shapiro, et. al., 1998). These findings with regard to over stimulation are consistent with the work of Tronick and Brazelton who pioneered this area (Brazelton, Koslowski & Main, 1974; Tronick, 1989). When a baby is being over stimulated the parents are ignoring the baby’s cues that involve saying "NO!" to the proposed plan of play or other interaction. The infant then escalates these cues of distress so that they become more apparent. However, the cues fail to change the interaction, and the infant will withdraw and shut down. If over stimulated, the infant learns that she doesn’t have the power to say "no" and subsequently, she cannot self-soothe (Brazelton, Koslowski & Main, 1974; Shapiro, 2004; Tronick, 1989). The baby learns that no matter what she does, it has no effect on her caregivers. Through research, we found that over stimulation and uncoordinated play are related to dysfunctional conflict between caregivers and lower perceived marital quality (Shapiro, 2004).

Depression also becomes more likely during this period (Gorman, 1997; Walther, 1997), especially for new mothers. Current estimates are that 10% of new mothers experience clinical levels of depression, while up to 50 to 80% experience some amount of depression (Walther, 1997). The big danger is what has been called "progressive postpartum depression," which has been known to lead to possible infanticide. A primary reason for this depression is the declining relationship between caregivers. Effects are even greater for populations experiencing poverty, the so-called "fragile families."
Fragile families have become a national concern. Unmarried women now constitute 30% of all births in the United States, up from 7 percent in the mid-1960’s and 5 percent in 1940 (Ventura & Bachrach, 2000). However, as McLanahan et al. (2002) have reported, among low-income unmarried parents the vast majority (82%) are romantically involved and in most of those families, the biological fathers are highly involved with and supportive of the mothers during pregnancy (see Parke & Neville, 1987). Sadly, one year after the baby’s birth, however, many of these parental relationships are no longer together and the remainders are at risk for dissolution (Carlson, 2002). Thus, couple interventions are even more important for single parents (usually lower-income), and the Bringing Baby Home couples workshop format can be applied to most unwed mothers. For a significant minority of teenage mothers, the primary supportive adult relationship will include multi-generational arrangements such as the grandmother-mother dyad (see Burton, 1995, 1992; Chase-Landsdale et al., 1999; Kellam, Adams, Brown, & Ensminger, 1982). Once again, the educational workshop format would be appropriate, with the supportive dyad changing appropriately.

The data indicates that the "Bringing Baby Home" preventative intervention using a psycho-educational format has significant positive results over time compared to the control group in the variables studied - marital quality, post partum depression and observed marital hostility (Shapiro & Gottman, in press). In a one-year follow up of our initial workshop group we found that: 1) The couples in the intervention group did not show the drop in parental relationship quality of couples in the control group; 2) The couples in our intervention group do not show the level of postpartum depression (and other psychopathology), compared to the control group; 3) The couples in our
intervention group did not show the increasing relationship hostility toward their partners that was evident in the control group. As a result of the workshop intervention, we have significantly reduced three high risk factors. We would expect to see 1) More positive interactions with the baby over the course of its development. 2) More coordinated play with the baby and less over-stimulation of the infant. 3) Better indices of healthy child emotional and cognitive development.

The Bringing Baby Home Workshop is a sixteen-hour research-based, psycho-educational intervention taught by Family Life Educators. This program is designed to reach a large target audience using minimal resources, and is currently being offered through the Swedish Medical Center in Seattle. This program is not couple’s therapy. The "Bringing Baby Home" workshop is focused on helping expectant and new parents make a smooth, positive transition to becoming a family. The workshop focuses on three goals: (1) strengthening the couple’s relationship. (2) facilitating and encouraging father as well as mother involvement in this parenthood transition and (3) giving expectant and new parents basic information about infant psychological development accompanied with relevant parenting tips.

This workshop consists of a combination of lectures, demonstrations, role-plays, videotapes and communication exercises designed to help couples work on relationship issues while focusing on promoting the positivity in their relationship. The workshop strives to enhance and maintain the quality of the couple’s friendship by creating a shared meaning system for new parents, as well as to learn conflict resolution skills. The initial focus of the workshop is to improve the quality of the couple’s friendship by teaching partners greater awareness about emotional communication, helping them to learn about
one another’s world, creating rituals of emotional connection and appreciation, building affection and respect, and managing and coping with daily stress. The couples then work on conflict, learning physiological self-soothing and problem solving in 4 steps: To achieve the goal of increased knowledge about parental interaction with children present, fighting in front of babies and children is addressed. Experiences relating to honoring fathers and the transition to parenthood are shared by each gender and reflected upon. The workshop helps increase awareness about the important role of fathers in this equation and the necessity of preserving intimacy and romance in the relationship.

"Bringing Baby Home" workshop teaches parents how to read their baby’s emotional cues including touching and massaging infants.

This research done to date on the Bringing Baby Home workshop is clearly only a beginning and it is limited in scope. Our goal is to make these interventions a standard part of educational offerings, for new parents. It can be taught by family life educators in a variety of settings with the potential of impacting the millions of infants born in the United States every year. If families are successful in identifying the challenges of parenthood and learning the rewards of parent-child interaction, children will have greater potential for healthy development. The quality of the couple’s relationship can be significantly increased leading to greater satisfaction, decreased postpartum depression, increased father involvement and, ultimately, stronger, happier families.
References


Shapiro, A.F. and Gottman, J.M., in press. Effects on marriage of a psycho-communicative-educational intervention with couples undergoing the transition to parenthood, evaluation at 1-year post intervention. *Journal of Family Communication*

